



THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR: R. A. Shimkets et al.

ATTORNEY DOCKET NO:

09800080-0080

SERIAL NO. 09/888,358

GROUP ART UNIT: 1634

FILING DATE: June 22, 2001

EXAMINER: Sally A. Sakelaris

INVENTION: "CGI-69 COMPOSITIONS AND METHODS OF USE"

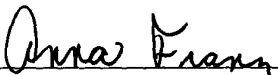
TRANSMITTAL LETTER

Express Mail" Mailing Label Number EV057356148US

Date of Deposit August 11, 2003

I hereby certify that the following items are being deposited with the United States Postal Services "Express Mail Post Office to Addressee" Service Under 37 CFR 1.10 on the date indicated above and is addressed to: Mail Stop: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313:

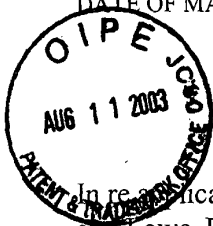
1. Amendment
2. Amendment Transmittal
3. Petition for Extension of Time
4. Supplementary Information Disclosure Statement
5. USPTO Form 1449
6. 5 References
7. Credit Card Payment Form
8. Transmittal Letter
9. Postcard
10. Express Certificate of Mailing No: EV057356148US



Signature of Person Mailing Application

EXPRESS MAIL NO. EV057356148US

DATE OF MAILING August 11, 2003



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Application of: Shimkets, R. A.
and Lowe, D. G.

Application No.: 09/888,358

Examiner: Sally A. Sakelaris
Group Art Unit: 1634

Filed: June 22, 2001

For: CGI-69 COMPOSITIONS AND
METHODS OF USE

TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

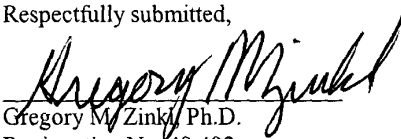
Transmitted herewith is:

- ☒ Credit Card Payment Form
- ☒ Three Month Extension of Time
- ☒ Amendment
- ☒ The fee has been calculated as shown below:

						Small Entity		or	Other Than A Small Entity	
	Claims Remaining After Amendment		Highest No. Previously	Present Extra		Rate	Addit. Fee		Rate	Addit. Fee
Total	19	Minus	34	0		x 9 =	\$		x 18 =	\$ 0
Indep.	3	Minus	9	0		x 42 =	\$		x 84 =	\$ 0
<input type="checkbox"/> First Presentation of Multiple Dependent Claim						x 140 =	\$		x 280 =	\$ 0
Total Additional Fee							\$		Total	\$ 0

- ☒ The Commissioner is hereby authorized to charge any fees associated with this communication not covered by check or credit card payment or credit any overpayment to Deposit Account No. 19-3140. A duplicate copy of this sheet is attached.

Respectfully submitted,


Gregory M. Zink, Ph.D.
Registration No. 48,492

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